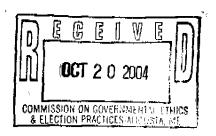
# STATE OF MAINE COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES

Mail: 135 State House Station Office: 242 State Street Augusta, Maine 04333 Tel: (207) 287-4179 Fax: (207) 287-6775 www.maine.gov/ethics

CAMPAIGN FINANCE REPORT OF INDEPENDENT EXPENDITURES 2004 GENERAL ELECTION



Name of Person/Committee Making Expenditure(s) MAINE TOWORDE LA TARTA  Mailing Address 12 SPRUCE ST.  City, Zip Code Augusto, MR. 04330 Telephone
Mailing Address 12 SPRUCE ST.
City, Zip Code Augusto, MP. 04330 Telephone
<b>Instructions</b> Please see previous page for reporting requirements. Complete notarized affidavit and two attached schedules.
Filing Schedule Independent expenditures for the 2004 general election in excess of \$250 per candidate must be reported to the Commission within 24 hours of making the expenditures. Independent expenditures aggregating in excess of \$100, but not in excess of \$250, must be reported to the Commission on October 12, 2004, October 27, 2004, or December 14, 2004 (whichever occurs first after the expenditure).
Please check:  ( Report of Independent Expenditure over \$250  ( ) October 12, 2004 Report of Independent Expenditure of \$250 or Less  ( ) October 27, 2004 Report of Independent Expenditure of \$250 or Less  ( ) December 14, 2004 Report of Independent Expenditure of \$250 or Less  ( ) Amendment to Earlier Report Dated:  ( ) Other (specify):
I CERTIFY THAT THE INFORMATION IN THIS REPORT IS TRUE, CORRECT AND COMPLETE.  Signature of PAC of Party Treasurer, or Other Person Making Expenditure(s)

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#### INDEPENDENT EXPENDITURES

### **AFFIDAVIT**

STATE OF Marie
COUNTY OF Kerneles

of the expenditures listed in the attached report independently, and not in cooperation, consultation or concert with, or at the request or suggestion of, the candidates named in the report or the authorized committees or agents of the candidates.

(Signature of Affiant)

Sworn to before me, this 20 day of October 2004.

Nobest Public/Athamey at Law)

Page\_\_\_\_ of \_ (Schedule B-IE-I only)

### Schedule B-IE-1

## CANDIDATE(S) SUPPORTED/OPPOSED

Please list all candidates that were the subject of independent expenditures. If more than one candidate was the subject of the expenditure, allocate the expenditure among the candidates.

Office sought by candidate (including district #)	Candidate's Name	Indicate whether expenditure was made in support of or in opposition to the candidate	Amount expended this reporting period for each candidate
27	STEVE STANLEY RTE. 116, HER BOXULE MEDINGY, ME. 04460  BILL DIAMOND CENTER Rd. WINDHAM ME. 04062	Support	1700.00
12	BILL Diamond Center Rd.	S4 PPORT	904.45 2870.00
20	Chris HALL RO BUT 218 BRISTOL, ME. 04539	Support Support	1395,44

Page\_\_\_\_of\_\_ (Schedule B-IE-2 only)

#### Schedule B-IE-2

### ITEMIZATION - INDEPENDENT EXPENDITURES

Please indicate the date, payee, purpose and amount of each expenditure. If you are reporting an agreement or obligation to make a future payment, please note that in the margin.

Date of expenditure	Payee, address, zip code	Purpose of expenditure	Amount
10 /20/04	OURSO BEYENOK, INC. 630 ROYAL ST. BATON, ROUGE, LA TOROZ UNITED STATES FOSTMASTET UCSTEIN AVE. AUGUSTA, MP. 04330	MAIL PIECE	4570,00
10/30/04	UNITED STATES FOSTMASTER WESTEIN AVE. MUQUETA ME. 04330	POSTAGE	2299.89
			,
1. Expenditures this page			6869.89
(Last page only Schedule B-IE-2)  2. Total from attached pages (Schedule B-IE-2)			
3. Total expenditures this period			6869.89